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harm's way.

However, if a stressor is too severe or protracted, a person's stress response, resulting in prolonged exposure to the stress hormone cortisol, can result in physical illness and depression.

Diagnosing Anxiety

Diagnosing an anxiety disorder may be complicated: the clinician must distinguish between normal and pathological anxiety to determine if an individual's emotional reactions are extreme. Anxiety can be a symptom of a medical condition, or of another mental disorder such as depression. In contrast to the normal anxiety that may accompany growth, change, and new experience, pathological anxiety is severe and enduring.

Symptoms of anxiety can range from simple nervousness before an important event to a heart seizure during a panic attack. Several categories of anxiety disorder, each with hallmark features - panic disorder, phobic disorders, Obsessive Compulsive Disorder, Post Traumatic Stress Disorder, and General Anxiety Disorder - are used to refine diagnosis and focus treatment.

One of the first steps in diagnosing an anxiety disorder is to determine if there is a known, specific cause. Several medical conditions and medications can cause symptoms that mimic anxiety. Over-use of alcohol, caffeine, decongestants, and other drugs can exacerbate anxiety.

If an underlying cause is identified, its treatment may alleviate the anxiety.

Treating Anxiety in Older Adults

The treatment of anxiety in older adults should always begin with a complete medical workup to rule out any underlying physical cause. Lab tests and imaging studies can help detect treatable medical conditions. A mental status exam should be performed to determine the presence of symptoms that may suggest another psychiatric diagnosis. Prescription and over the counter medications should be reviewed, and other substance use should be explored. When there is cognitive impairment, a collateral report will provide the necessary history.

Both medications and psychosocial therapies may be helpful in treating anxiety in older adults. The goal of treatment is to improve the quality of life and maintain the individual in the community. Individual, group, and family therapy can help older people develop resources for coping with the anxiety that may accompany the many challenges of aging. Lifestyle changes, such as diet and exercise, can make a significant difference. Alternative therapies, including yoga, meditation, aromatherapy, and breathing exercises may calm an anxious mind. Regardless of the treatment plan, it is imperative that clinicians treating older people maintain a genuine belief in the possibility of growth and change in later years.

Foundation and Corporate Support

We thank our many foundation and corporate supporters who enable us to launch new programs and enhance services.

New supporters include **The Herman Forbes Charitable Trust**, which provided \$20,000 toward the implementation of SPOP's technology plan; and **The Starr Foundation**, which gave a two-year \$200,000 grant toward the expansion of the Clinic outreach program. Five general operating support grants will enable SPOP to initiate new services and expand our capacity to more effectively serve the older adults in the community: **Collegiate Church Corporation**, \$3,000; **Sidney & Judith Kranes Charitable Trust**, \$2,000; **Schweckendieck Trusts**, \$10,024; **Adolf and Ruth Schnurmacher Foundation**, \$12,500; and the **Charles and Mildred Schnurmacher Foundation**, \$5,000.

A grant of \$143,000 from **The Fan Fox and Leslie R. Samuels Foundation**, will enable the agency to initiate a program to provide mental health counseling to adults who are dually diagnosed with mental illness and alcohol or substance abuse.

Other special project grants include **Barker Welfare Foundation**, \$15,000; **Columbia Community Service**, \$3,800; **FJC - A Foundation of Donor Advised Funds**, \$20,000; **United Way of New York City**, \$7,000; and the **West End Collegiate Church**, \$2,000.

SPOP also thanks **Kaye Scholer LLP**, New York for its pro bono legal assistance.

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SPOP's mission is to enhance the quality of life of older adults and to foster their independent living through the delivery of comprehensive mental health and supportive services, advocacy and education.

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October 2005

Service Program for Older People, Inc.

New Name — Same Services!

Long known as SPOP, the agency has officially changed its name from

New York Service Program for Older People, Inc.

to

Service Program for Older People, Inc..

The Age of Anxiety

BY LAUREN TAYLOR, LCSW

Older Adults and Anxiety

With age comes the continual challenge of adaptation, and constant change, which may create anxiety. The prevalence of late-life anxiety disorders has been underestimated. Older people are less likely to report psychiatric symptoms and more likely to emphasize their physical complaints. The clinical manifestations of anxiety disorders in older adults often differ from those in younger people. Symptoms may appear less severe, but the effects are often more debilitating.

Older people may have coexisting medical conditions, take many medications, and experience cognitive impairment. Often there is no identifiable stimulus, and a free-floating anxiety can intensify as an older person comes to terms with mortality. The increasing fragility of the nervous system may account for increased anxiety after a stressful experience.

What is Anxiety?

Anxiety disorders represent the most prevalent group of psychiatric disorders in the United States today. Some individuals have a genetic susceptibility that makes them more vulnerable to stress, but environment and experience affect how that stress will be expressed.

Over the years many theories have attempted to explain the causes and meanings of anxiety. Freud believed that anxiety resulted from repressed aggressive or sexual thoughts and desires. Behaviorists perceive the anxiety response as a product of behavioral conditioning.

Anxiety is not a single response, but rather a complex set of responses to a stressor, either external or internal. Research studies have produced reliable data suggesting that at least some genetic susceptibility is present in many anxiety disorders. Almost half of all individuals with an anxiety disorder have at least one affected first-degree relative.

The stress response is the body's attempt to maintain homeostasis – the balance of bodily systems, such as temperature, glucose levels, and hormones – after a stressor generates a change. At the sign of a physical or psychological threat (a stressor), the brain activates chemicals that allow for a quick response. Heart rate accelerates, blood pressure rises, breathing rate increases. Body functions unrelated to immediate survival, such as digestion and growth, are dulled. The individual is ready to fight or flee. These responses are highly adaptive in the face of imminent danger.

Humans have a challenging problem. More than any other species, our stress response, the body's activation of chemicals that allow for a quick response to danger, can be set in motion by the mere anticipation of danger, even where none exists. Anticipatory stress, called signal anxiety, can be functional, helping us to prepare or problem-solve.

What happens when an individual erroneously believes that there is danger, and has difficulty turning off the stress response? Everyone experiences anxiety, but only for some does it cause functional impairments. Anxiety becomes problematic when it persists beyond the immediate threat. Sometimes there is an obvious trigger, but often individuals don't know why they are unable to stop worrying. Unremitting anxiety can interfere with every aspect of a person's life.

Anxiety is experienced both physically and emotionally. Physical symptoms include muscle tension and autonomic hyperactivity (sweating, racing heart, diarrhea, dizziness, etc.). Psychological symptoms include apprehension, worry, hyper-vigilance, irritability, distractibility, and insomnia. Body and mind feel out of control. Whether or not a situation is perceived as stressful depends on an individual's psychological resources, defenses, and coping mechanisms.

Not all physical and/or psychological responses to stress are harmful. Some are necessary to keep people out of

Staff News

In Adult Day Services (ADS), **Ken Cooper** was promoted to Assistant Director, and **Marie Montanez** was promoted to full-time Program Aide. **Deborah Genninger**, previously a student intern, is now the Social Worker Supervisor. Joining the ADS staff is **Linda Chesney**, Bi-Lingual Social Worker.

Zayani Lavergne-Friedman has joined SPOP as the Bi-Lingual Psychiatric Social Worker for the Healthy Encounters Program.

Rowland Hill is SPOP's new Director of Outreach, working with referring agencies/sites throughout Manhattan and supervising outreach staff. New outreach staff include **Sandra Agreda**, previously a student intern for the GOAL program and **Brett Saarela**. Sandra, a Bi-Lingual Social Worker, now provides counseling at outreach sites, and Brett is the Psychiatric Social for SPOP's new Mental Health and Substance Abuse Service.

Carola Chase was promoted to the position of Coordinator of Clinic Operations.



Jeff Nichols, MD, President, SPOP's Board of Directors welcomes guests at the 25th Anniversary celebration of SPOP's Continuing Day Treatment Program (CDTP).

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Message from the Executive Director

SPOP is one of the only agencies to bring mental health counseling where the need is greatest and where older adults are most likely to access them – at-home or at their local senior center or service site. As a result, SPOP now provides clinical and mental health outreach services at 30 locations, as far south as Madison Street and as far north as West 174 Street.



Over the next year, we will be expanding our Clinic outreach service into two new sites, and will also be launching a new program – Mental Health and Substance Abuse Service – to provide counseling for dually diagnosed older adults, those seniors who have a primary diagnosis of psychological illness and a secondary diagnosis of alcohol and/or substance use disorder. (See the related article below.) These service expansions will create enormous supervisory, clinical and administrative requirements and place significant demands on staff. Establishing a relationship with a new site requires multiple meetings with site directors, program staff and case workers. In addition, maintaining a high level of referrals at all outreach sites requires ongoing assistance from SPOP. Support includes helping staff to establish referral systems and conducting presentations to partner site staffs on mental health issues, and on how to make appropriate referrals.

To meet the supervisory and outreach demands of our expanded services, ensure that we can effectively deliver our services wherever they are needed, and that we continue to provide the highest quality of services, we have reorganized agency staffing and created a new position, Director of Outreach Programs. Joining us in this new position is Rowland Hill. We welcome our referral and outreach sites to call Rowland at 212-787-7120 ext. 521, to introduce him to your agency and your needs.

Adult Day Center Has Openings

SPOP's Adult Day Center provides a safe, caring and stimulating environment for adults with memory loss. Activities are designed to meet the social, cultural, recreational and wellness needs of all participants. Breakfast, hot lunch and a snack are served daily. Door-to-door transportation is available on a private bus.

Hours: Monday - Friday, 9:00 a.m. to 3:00 p.m.

Eligibility: Adults with cognitive impairments or memory loss

Location: 188 West 88 Street (off Amsterdam Avenue)

Call Amy Berg at (212) 787-7120 ext. 140 for information or to schedule a visit.

Service for Older Adults with Alcohol or Substance Use Problems Opens

It is estimated that 10 to 15 percent of adults over age 60 have problems with alcohol or alcohol in combination with prescription drugs and over the counter medicine. Though alcoholism in the general population has been the focus of increasingly sophisticated recognition and treatment, for older adults it is an under-diagnosed and under-treated illness.

To meet the need of these under served older adults, SPOP has launched a new counseling service. With funding from The Fan Fox and Leslie R. Samuels Foundation, SPOP now serves adults 55 years and older who suffer from mental illness and an alcohol or substance use disorder. Services are being provided at SPOP's mental health Clinic, 302 West 91st Street, at designated senior centers and sites, and at the client's home if the older adult is unable to travel due to physical or psychological illness

"There is an enormous need for this service," explains Nancy Harvey, Executive Director. "While there are a number of programs geared to all ages of recovering alcoholics/substance abusers, there are very few outpatient programs in Manhattan specifically geared toward seniors. Fortunately, alcohol and substance abuse disorders are a treatable problem. We thank the Samuels Foundation for recognizing the significance of this issue and supporting our efforts to address these under served older adults."

New services for dually diagnosed adults include individual insight-oriented and supportive counseling provided by a specially trained Social Worker, psychiatric evaluation and supervision of medication, case management, family/caregiver counseling, and short-term behaviorally focused therapy. Since symptoms of alcohol and substance abuse are often confused with symptoms of mental illness associated with aging, SPOP will train staff at referral sites in how to identify symptoms of alcohol and/or drug abuse.

Eligible adults must be age 55 or older and have a primary diagnosis of mental illness with a co-occurring alcohol or other substance use disorder. Information and referral assistance is also available. Program hours are Monday through Friday, 9:00 a.m. to 5:00 p.m. For more information call Brett Saarela, Psychiatric Social Worker, at 212-787-7120 ext. 509.

New Bereavement Groups for Adults Coping with the Loss of Spouse/Partner

SPOP's Widowed Persons Service offers ten week support groups for adults who are coping with the recent loss of a spouse/partner.

Day and evening sessions are held at SPOP, 302 West 91 Street.

There is no fee for this service.

Call 212-787-7120 ext. 520 to register, or for more information.

Training for Senior Services Staff

Several converging trends have dictated a need for diagnosing and treating mental health problems among older adults — increasing numbers of older adults; overextended baby boomers who are caring for older adults while caring for children; and a growing recognition of the prevalence of mental illness in older adults. To meet this need, SPOP has developed a series of educational seminars for professionals and support staffs of senior centers/sites.

The seminars address how to identify mental health problems in older adults, and how to make mental health referrals. The series consists of five one-hour sessions, with each session addressing a specific mental health issue as it pertains to older adults. The sessions can be

tailored to meet the different needs of professional and support staff.

"The seminars help SPOP to meet its mission to expand the provision of mental health services for older adults," Nancy Harvey, Executive Director explains. "At the end of the series, each participant will be more likely to make appropriate mental health referrals, resulting in earlier treatment of mental illness in older adults."

SPOP Welcomes New Board Members

Ruth Kavesh, previously with Time Warner, Inc., now uses her expertise in communications to help non-profits. **Elisabeth Luce, CPA**, is a Tax Senior Manager at Smart and Associates LLP. **Amita Schultes**, a senior consultant with Colonial Consultant, LLC, advises foundations on investment policies. **Elyse Siegel**, is a licensed insurance agent for New York Life.

Moments of Healing:

Continuing Day Treatment Program Celebrates 25 Years

SPOP's Continuing Day Treatment Program (CDTP) celebrated 25 years helping older adults with serious and/or persistent mental illness. "CDTP is one of the only day treatment programs that serves older adults, many of whom have been in and out of psychiatric hospitals their entire lives," explains Nancy Harvey, SPOP's Executive Director. "For many

of these older adults, it is only through the support of the CDTP staff that they are able to remain in their homes."

The CDTP's interdisciplinary team, comprised of social workers, case managers, a psychiatric nurse and psychiatrist offer a supportive setting for people who benefit from a highly structured socialization program. To ensure that each participant receives the individualized support they need, the program offers a range of services, including psychiatric screening and evaluation, social and recreational activities, daily breakfast, hot lunch and snack, transportation, assistance with entitlements, medication management, individual and group counseling.

At the celebration, Amy Berg, Senior Director, Adult Day Services, said: "CDTP succeeds by making a difference in the lives of participants – through small moments that over time culminate in improvement, stability and change for the clients. For CDTP clients, these various "moments" are repeated over and over. In time they add up to greater emotional health and stability which leads them to greater participation in meaningful activities, improved relationships and a willingness to utilize better self care including exercise and following through with medical care. Over the CDTP's 25 years there have probably been thousands, maybe millions of these healing moments."

Why I Like SPOP

For the CDTP's 25th Anniversary, CDTP participants shared their thoughts about the program.



I like SPOP because when I first arrived here I had a lot of problems in my life but in coming to SPOP I am getting the help I need and it is one of the best centers I have been a part of. *Luz*



I like to come to SPOP because it gives me a chance to relax and make new friends. *Nieves*

I like SPOP because of its very warm atmosphere and I get to speak to a lot of people. *Philip*

SPOP keeps my mind and spirit active and alive, also I love SPOP because I find companionship among many friends. *Sidney*



I like coming here because there are so many activities. *Dorothy*

I like coming to SPOP for these reasons: There are friendly people, the staff takes the people on special trips and they serve a delightful breakfast. *Jane*

I come to SPOP because I feel like I have a family. They give me moral support. I feel comfortable at SPOP. *Lydia*

2005-2006 Educational Seminars — Spaces Available

October 27, 2005

Strength in Numbers: Group Work with Older Adults

Lauren Taylor, LCSW

November 17, 2005

Loss, Grief and Resilience: Helping People Cope with Change

Barbara L. Danish, MA

January 26, 2006

Exploding the Stereotypes: Understanding Differences within the Latino Community

Elienay Hernandez, LMSW

February 16, 2006

Substance Abuse in the Older Adult: A Hidden Problem

Brett Saarela, LMSW

All sessions are held on Thursdays from 9:30 am to 11:00 am at SPOP 302 West 91 Street. Seminars are offered free of charge. *Space is limited. Advanced registration by e-mail, mail or fax is required. There is no telephone registration.* Visit www.spop.org to print a registration form or register online.

Looking for support? Help with problem solving?

SPOP's Clinic has openings for individual and couple counseling, and group psychotherapy for adults age 55 and over.

For more information, or to make a referral, call the Intake Worker at 212-787-7120 ext. 514.